



MEMBER ASSOCIATION OF



NEWSLETTER

SEPTEMBER, 1981.

President's Column

It is a pleasure to report on The Council Meeting and the 8th Congress of the International Association of Dentistry for Children, held at Davos, July 1981.

1. Membership

Membership of I.A.D.C. is growing with many countries becoming desirous of participating in the Association. There are 29 member countries in the Association and Korea was elected to membership at the recent Council meeting. India, Cuba and Iran have made enquiries concerning membership. In addition there are 541 supporting members. I feel it is here that members of A.S.D.C. could increase our support of the I.A.D.C. The subscription for a supporting member is £3 sterling per year and includes the I.A.D.C. Journal and Newsletter. It would assist the I.A.D.C. administration if block subscriptions could be made. Therefore I suggest that any State Branch not participating at present in block subscriptions should discuss this point at its next meeting.

2. Prize in Child Dental Health

Professor Bengt Magnussen of Sweden, one of the staunchest supporters of I.A.D.C. died last year. In order to perpetuate his memory the Astra Prize in Child Dental Health has been renamed the 'Bengt Magnussen Award'.

3. Visual Aid Material

A film and visual aid committee under the direction of Dr. S. Moss - U.S.A. and Dr. M. Schouker - France are organising material which should be of assistance to all member countries; this should become available in approximately six months. At the Melbourne Congress there will be a special area available to view this project.

4. Constitution

The agenda item which created most discussion was the proposed changes to the Constitution. Traditionally the President Elect has been the Organising Chairman of the Congress starting the day after the Council Meeting. It has been proposed by the Constitution Sub-Committee that the President Elect not necessarily be the organising Chairman of the Congress. Also that the Immediate Past President should not be on the Board of Directors but be replaced by an Elected Representative for National Member Societies. If these changes were adopted it is believed by many councillors that it would allow involvement of dedicated councillors from countries who possibly may never have the opportunity to host a Congress. (All A.S.D.C. State Branches will be further informed on this

President's Column Continued

matter as a decision is required to be made during the A.S.D.C. General Meeting in Perth next year.)

Although there were several other proposed changes to the Constitution only the three contentious items are listed,

- i. The Board of Directors will be entrusted with management and administration of the Association and be composed of:-

The President

The President Elect

The General Secretary

The Editor of the Journal

An Elected Representative for National Member Societies

A Legal Representative of Belgian Nationality

- ii. All the above mentioned except the Legal Representative of Belgian nationality shall have the right to vote at the meetings of the Board of Directors.

- iii. The members of the Board of Directors shall be elected by the Council for a period of two years. The General Secretary, the Editor, the Legal Representative, and the Elected Representative may be elected to succeed themselves, the Elected Representative though for one new period of two years only. Neither the President nor the President Elect can be elected to succeed himself.

5. Future Congresses

Dr. Hall presented a detailed report of arrangements for the 9th Congress in Melbourne 1983. Dr. Pauly presented a preliminary report of the 10th Congress in Costa Rica in 1985. If for some reason Costa Rica is unable to host the 10th Congress it will be held in Barcelona, Spain. Canada presented a very strong case to host the 11th Congress in 1987, and was successful in receiving Council approval ahead of Greece, Austria, Japan and India. For those who plan well ahead, the 11th Congress will be in Toronto, in June, 1987.

6. Preventive Dentistry - use of Fluorides

The following statement was passed unanimously by Council -
"The International Association of Dentistry for Children strongly advocates the use of fluorides for caries prevention on a world-wide basis.

All Members of the Association are encouraged to initiate or assist the planning of such programmes adjusted optimally to the various conditions in their home countries.

Thus, the International Association of Dentistry for Children powerfully supports the resolutions unanimously carried by Representatives for Health Authorities in most Member Countries of the World Health Organization."

7. Board of Directors

The Board of Directors, as elected at the conclusion of the Council meeting at Davos, are:-

President: Professor Pal Toth - Hungary

President Elect: Professor Ludwig Rinderer - Switzerland

Secretary: Professor John Murray - United Kingdom

President's Column Continued

Editor: Dr. Guilianna Falcolini - Italy

Immediate Past President: Ex Officio Professor Manuel Album - USA

A Legal Representative of Belgian Nationality who is yet to be confirmed.

8th Congress

There were almost 500 participants (from 39 countries attending the 8th Congress in Davos. A list of the countries with the number of participants attending is given below.

The Congress was very successful and the Organising Committee is to be congratulated on the success of both the Scientific Programme and the Social Programme.

On the last two days of the Congress, Roger and Vera Hall, John Wilde and I manned a stand to distribute information about Australia and the 9th Congress in Melbourne. The Australian Tourist Commission and Qantas assisted by making available pamphlets on Australia written in English, German, French and Italian. Also a 35 minute colour film with the commentary in German was screened twice with attendances between 120 and 150.

The provisional registration form for the 9th Congress was available and over 120 forms were completed by the end of Congress. The interest in coming to Australia is extremely high but the comments most often heard are that 'it is such a long way to go and the air fares would be high'. In promoting this conference all of us should correspond with our overseas dental colleagues and try to persuade them to come to Melbourne in 1983.

There are provisional registration forms which you could include in with your letter. These are available from Roger Hall or your State Branch Secretary.

Kevin Allen

A list of the countries with the number of participants attending

Algeria 2	*France 17	*Israel 18	*Poland 4
*Argentina 3	Germany(West)31	*Italy 2	South Africa 5
*Australia 11	*Germany Demo-	*Japan 67	*Spain 3
*Austria 2	cratic Repub-	Korea 1	*Sweden 28
*Belgium 3	lib 4	Luxemberg 1	*Switzerland 118
*Canada 16	*Greece 5	*Mexico 2	*Turkey 1
*Costa Rica 1	Hong Kong 1	Lebanon 1	*United Kingdom 12
C.S.S.R. 1	*Hungary 31	*Netherlands 10	*U.S.A. 42
*Denmark 12	India 1	Nigeria 1	Yugoslavia 9
*Finland 14	Iran 1	*Norway 11	
	Iraq 3		

* denotes member country of I.A.D.C.

Other member countries in addition to those listed above are Brazil, Cuba, Eire, New Zealand.

[The production of this Newsletter
has been assisted by
Colgate Palmolive Pty. Ltd.]

Federal Secretary's Report

The following statement was issued by the Council of the I.A.D.C. after the recent meeting in Davos, Switzerland, on 22nd July, 1981:-

"The International Association of Dentistry for Children strongly advocates the use of fluorides for caries prevention on a worldwide basis.

All members of the Association are encouraged to initiate or assist the planning of such programmes adjusted optimally to the various conditions in their home countries.

Thus, the International Association of Dentistry for Children powerfully supports the resolutions unanimously carried by Representatives for Health Authorities in most Member Countries of the World Health Organisation".

Obviously, the Secretary of the I.A.D.C. considered this item from the Agenda to be of such importance that all member Societies should be notified without delay. It certainly is a strong endorsement of fluoridation as a public health measure and must

surely reinforce our stand against the anti-fluoridation lobby. When one appreciates that was a unanimous decision it can be seen as an unequivocal ratification of fluoride for caries prevention.

A NSW member wrote to me recently with an interesting idea that the Society might be prepared to adopt a widespread practice in the USA. That of a certificate of Society membership being issued to all current members. This could be discreetly placed on the practitioner's office wall, thereby indicating to the patients of the practice the dentist's field of special interest. This will no doubt be discussed by Federal Council, so if you have any comments to make about this proposal please direct them to your Federal Councillor.

Tom Mackay

NEW SOUTH WALES BRANCH - SEMINAR

to be held in the
SYDNEY OPERA HOUSE

Friday and Saturday 16th-17th October.

An excellent group of lecturers has been arranged and an equally pleasant social programme has been organised. A brochure is at present being printed and will be circulated to all A.S.D.C. members very shortly.

We are looking forward to entertaining members from interstate at what we are sure will be a very worthwhile and enjoyable meeting.

Further details from:

Ross Toll, 3 Berwick St., Coogee.
N.S.W. 2034

Victorian Branch

Since the last Newsletter the Victorian branch has been very busy with our Convention day and one dinner meeting.

The Convention Day was held at the School of Dental Therapy and was well attended with the theme being 'Integration of the Disabled Child into Dental Practice'. Many aspects were considered with David Stickles and Rosemary Crossley providing parental insight into the business and problems that inhibited dental care. In particular they stressed that disabled children do not receive the same treatment because people do not consider it worthwhile.

Beryl Thorpe discussed the problems of children who have Sensory Integration disabilities, their difficulties in adapting to the dental environment and accepting dental care.

Dr. Laurence Bertak enlightened the gathering concerning the non-communicating child and provided a vast amount of information. Dental flavour was added by Dr. Des Crack who presented part of his homebound and handicapped survey; this only emphasized further the dental problems of the disabled.

Clive Wright discussed the changing emphasis in dental education and Fraser Gurling presented a practical approach to treatment of the handicapped.

Having such a varied and interesting group of speakers provided an interesting day which was aided by a delightful lunch.

Dr. Barry Feiglin was the speaker at our third dinner meeting. Barry provided an excellent dissertation on Trauma to the Secondary Dentition. He discussed all forms of injury from the simple enamel fracture to avulsion. Barry stressed the importance of diagnosis and proper treatment. Of particular interest was the treatment of the open apex and the discreet use of

ledermix in the treatment of such teeth. Barry's talk was further enhanced by his delivery and diet projection technique.

The Victorian branch has one further Dinner Meeting with Mr. Bruce Levant speaking on the treatment of cleft palate patients.

James Lucas

New South Wales Branch

Since the last Newsletter, two meetings of the NSW Branch have been held. On the 19th May our guest speaker was Dr. Kevin Bourke whose subject was "Host Resistance can be Improved with the Chewing Brush". Dr. Bourke gave a very interesting lecture about his invention the Chewing Brush, illustrated with a slide presentation showing how caries, periodontal and orthodontic problems had been improved with use of this brush. A side benefit which has been noted is an improvement in behavioural patterns in some patients whose dental condition has been helped with the brush. Further research is being done in both the USA and Japan on this aspect.

Our next meeting was held on 21st July, the lecturer was Dr. Richard Abbott, Orthodontist, whose subject was "Background Orthodontics". Dr. Abbott gave those attending the meeting a thoroughly entertaining lecture on a variety of aspects of orthodontics.

The next Branch Meeting will be held on Tuesday 15th September, the guest speaker will be Dr. Evan Godfrey, whose subject will be "Oral Surgery for the Child and Adolescent".

R.M. Toll

Queensland Branch

Members were interested to hear reports of the Federal Council Meeting of the A.S.D.C. from delegates, P.Comiskey and J. Keys at the bi-monthly meeting held on the 1st June.

The clinical project to assess the incidence of "bottle caries" in pre-school children in our members' practices has been in full swing for the three months from May to July. So there was some lengthy discussion by members concerning an endorsement for the use of certain Vitamin C supplements published by the A.D.A. in the Federal News Bulletin (March issue). A letter expressing the opinions of the branch meeting was drafted to circulate to appropriate people.

At the August Meeting, Dr.I. Walke shares his impressions of this year's Asian-Pacific Dental Congress and the new Dental Hospital in Hong Kong. Dr.A. Defteros stimulated lively clinical discussion after he presented a challenging case report of a surgical re-implantation.

The branch is holding its annual weekend seminar at Kooralbyn, via Beaudesert on the 29th - 30th August. The theme is "Practical Dentistry for the Disabled" with emphasis on areas of practical intervention by the general practitioner. All visitors will be guaranteed a warm welcome.

Lynette McAllan

Western Australia Branch

The June meeting of the W.A. Branch was held at A.D.A. House in West Perth. The meeting was addressed by Dr.Lawrie Baker. Lawrie has recently returned to private practice in Perth, after an extended spell in London and a period at the Perth Dental Hospital. He spoke enthusiastically on Microfilled Composite Resins, their properties and their applications. He showed slides of cases he had treated and the quite remarkable transformations displayed spoke for themselves.

The July meeting was held at the Anatomy Department of the University of W.A. Despite the inclement weather, the Royal Wedding and the Miss Universe content, a fair attendance was recorded. The meeting was addressed by Dr.Peter Gregory, who spoke on "Pedodontic Crowns" and then showed an excellent video tape on the preparation and placement of a stainless steel deciduous molar crown. The meeting also allowed members to farewell Peter. He and his family left for the North Western University in Chicago on 6th August. They will be away for 12 months. The Branch owes special thanks to Dr.John McGeachie of the Anatomy Department for not only making that Department and its facilities available but also for being in attendance and ensuring that all equipment functioned.

A.M. Devlin

CORRECTION

Professor Lars Granath

In error, in the June Newsletter, Lars Granath was referred to as an Endodontist. He is of course a Paedodontist, being Professor of Paedodontics and Head of the Department of Paedodontics, University of Lund School of Dentistry, Malmo, Sweden, and has held the position since 1972.

The oversight of this error is regretted.

Max Horsnell.

South Australian Branch

Our last Branch meeting, held at the Naval and Military Club, although low in attendance, proved high in interest. Dr. Colin Robertson, an endodontist, presented an "Overview of Traumatic Injuries". Colin's extremely well illustrated talk had obviously taken considerable time to prepare, and was very well received by the members. To the recent graduates it may have been useful revision, but to the older graduates the presentation contained some new and useful information.

Three of our members, Drs. Kevin Allen, Jeff Wright and Fraser Gurling travelled to Melbourne for the Victorian Branch one day Seminar on Handicapped Children. Kevin and Jeff reported to our Meeting a brief outline of the programme.

One of our members, Dr. Ian Watson, has found that time has caught up with him - especially on our Branch meeting nights, and therefore has unfortunately resigned from the Society. We hope that Ian can rejoin us in the future.

Our next meeting is on 1st September at the University Staff Club where Ms Janie Barbour, a Social Worker with the Adelaide Children's Hospital, will discuss the growing problem of Child Abuse.

The Annual General Meeting of our Branch will be held on 27th October at a venue to be decided. Mrs. Gwen Wilkinson, a Dietician at Modbury Hospital, will follow up her recent Nutrition talk at one of the Post Graduate Committee in Dentistry's Day courses - Visitors are welcome.

John Kibble

PRE-CONGRESS MEETING PERTH 1982.

A "Joint Pre-Congress Meeting of the Australian Society of Dentistry for Children and the Australian Society of Endodontology" will be held

on Friday, April 30th and
Saturday, May 1st 1982

at The Sheraton Hotel - Perth, Western Australia

Principal Lecturer: Professor Lars Granath,
University of Lund,
Malmo, Sweden.

Subject: Paedodontic Endodontics.

This meeting will be followed immediately by the 23rd Congress of the Australian Dental Association in Perth, 2nd - 7th May, 1982.

Further information regarding the Pre-Congress Meeting may be obtained from:

Dr. B. Barblett,
11 Kings Road,
Subiaco,
Western Australia. 6008

PROTECTIVE EFFECT OF MILK AGAINST CARRIES.

Preparations of milk, ice creams, and yogurts were tested against similar mixes from which the milk component had been excluded. With the exception of chocolate milk, the test results showed that the presence of milk in a fermentable food reduces its destructive impact on dental enamel.

The investigation made use of the Orofax apparatus for producing in vitro caries. It provides a drop-by-drop flow of human saliva onto plaque covered enamel sections suspended in cuplike containers that retain a changing small quantity of the saliva. Before test foods were added to the containers, plaque had been grown on enamel sections, cut from different impacted third molars. After exposure to the test foods for six days the sections were examined.

Data show that the addition of either whole or skim milk powder consistently reduced the depth of demineralization. Overall, whole milk supplements seemed to offer somewhat greater protection than those of skim milk.

Results of the tests of milk solids on dissolution of granular enamel and on acid production show that they reduced enamel dissolution, but increased acid production.

In general, whole milk produced fewer Orofax caries than its 5% lactose control, but commercial chocolate milk was much more destructive. Both vanilla and chocolate ice cream, as well as plain and vanilla yogurts, produced less demineralization than their respective controls.

(Bibby, B.G. et al. Journal of Dental Research 59(10):1565-1570, 1980)

FINISHING TIMES FOR COMPOSITE RESINS.

It is commonly accepted that surfaces of composite resins polymerized against a matrix form the smoothest surface, but usually this smooth surface cannot be retained and some reduction is required after removal of the matrix. Although many techniques have been suggested to minimize the roughness that results from finishing, none has produced a surface approaching the smoothness found on removing the matrix band.

Another approach to the improvement of surface quality is the elapsed time between removal of the matrix and

finishing; reports vary on the best time to finish a composite resin. This in vitro study was designed to determine whether surface smoothness is a function of the time at which the resin is finished.

Two composite resins were used in the study and nine commonly recommended finishing times were investigated. The intervals were 5, 7, 10, 15, 20, and 30 minutes, and 1, 24, and 49 hours. Four series of ten mixes were run for each brand of resin. Surface roughness was evaluated from photomicrographs and by use of a Proficorder-Microrecorder.

As expected, the surface of the resins were smoother when polymerized against a matrix. However, when finishing procedures are needed, none of the time intervals tested produced a smoother surface. The smoothness of composite resin after finishing is not a function of the time at which it is finished.

(Savoca, Dennis E. et al. Journal of Prosthetic Dentistry 44(2):167-170 1980.)

EUPHEMISTIC LANGUAGE IN PEDODONTIC PRACTICES.

The vocabulary used by pedodontists to communicate with the child dental patient seems to be endless and is limited only by the imagination of the dental health team. In a survey of members of the American Academy of Pedodontics to determine words and phrases pedodontists use in establishing relationships with their patients, 963 reported their most frequently used greetings and terms to describe operatory equipment, instruments and procedures.

While the most common greeting was "Hello" followed by the child's name, many initiated conversation with a statement such as "I've been looking forward to seeing you", or "What a pretty dress (or big boy)".

Many unusual terms were reported for the dental chair, the hand piece and rubber dam.

Although the terminology used by pedodontists is widely diverse, trends do exist in communication patterns.

(Berson, Robert B. et al. Pediatric Dentistry 2(2):110-116, 1980)

THOUGHT

How sharper than a serpent's tooth
it is

To have a thankless child.
(King Lear)

FROM THE JOURNALS.

INFORMATION YIELD FROM ROUTINE BITEWING RADIOGRAPHS FOR YOUNG ADULTS.

The posterior interproximal (bitewing) radiograph was introduced as a diagnostic aid in 1925. It was promoted on the basis of early disclosure of proximal carious lesions which some believed could not be located by even the most careful examination. An average figure of 50 per cent additional disclosure is usually quoted.

A changing public and professional attitude toward all the uses of ionizing radiation has compelled reassessment of our radiographic practices.

Results indicate the bitewing radiograph made a significant contribution to the detection of caries in the vast majority (89%) of patients in this study. Aside from its value in assessing the depth of known lesions in relation to the pulp, the radiographs also contributed by (1) confirming the existence of 13% of the proximal lesions suspected of being present by clinical exploration and (2) disclosing an additional 51% yield of proximal lesions not found or suspected by clinical examination. This high productivity was a surprise to the authors.

From the data presented here, the bitewing radiograph is as productive and indispensable for the disclosure of proximal cavities as earlier studies had indicated. They can continue to be used for new patients with assurance that there is significant benefit for the radiation expended.

(Stephens R.G. et al J. Canada Dent. Assn. No 4 1981)

WHY IS CHICKENPOX CALLED CHICKENPOX?

The term chickenpox appeared in the medical literature for the first time in 1694, but it had evidently been in common use long before then.

The name comes from the resemblance of

the chickenpox vesicle to the chick pea. It is the world's third largest seed crop exceeded only by dry beans and peas. The surface texture and cream colour of the large commonly available chick-pea are similar to an early pustular chickenpox vesicle.

If a Spanish physician had first reported the resemblance of the chickenpox vesicle and the chick-pea, would we now have an etymologic legacy of "garbenzopox" (Lerman Stephen J.M.D. Clinical

Pediatrics Vol.20 No.2 1981)

EFFECTIVENESS OF DISTRACTION TECHNIQUES IN THE MANAGEMENT OF YOUNG CHILDREN.

This study examined the usefulness of popular television shows as a distraction technique for children 3 to 6 yrs. old.

The children were randomly assigned to two groups; an experimental group which viewed videotaped programmes like Sesame Street and a control group which viewed no videotapes.

No effect of the programme was found. Anxiety, self-reported stress and heart rate all decreased with age while co-operative behaviour improved. The response pattern across visits indicated an increase in stress from the first to the third visit, with a drop on the polish visit. These results suggest that distraction techniques, while successful with older patients, may not be effective with younger children.

(Venham L. et al AADR Abstracts 1980 No.853)

REMEMBER -Anger is only one letter short of danger.

Worry gives little things big shadows.

NATIONAL SEMINAR ON PLAYGROUND DESIGN AND SAFETY

CANBERRA 16th - 18th June 1981

The Seminar was held under the auspices of the Child Accident Prevention Foundation of Australia and the Royal Australian Institute of Parks and Recreation. Roger Hall was invited by the Organizing Committee to present a paper on "Injuries of the Face and Jaws in Playground Accidents", during the session on "Injuries in Playground". The following is an edited version of his Report on the Seminar.

The Seminar was attended by 200 delegates representing Government Authorities at all levels, Industry, Playgroups, Medical and Nursing Personnel and other interested parties.

The Objectives were:-

1. To present factual data on playground accidents in Australia, and to encourage its future recording by all those involved in the management of traumatic injuries.
2. To strengthen co-operation between designers, manufacturers and local government authorities and education departments responsible for providing playground equipment in parks and schools.
3. To educate personnel involved in the supervision of children's play, in safety procedures.
4. To identify the Major problem areas in playground design, maintenance and supervision.

Two Guest Lecturers had been invited; Professor Seymour M. Gold, Professor of Environmental Planning, University of California, and Lieutenant Colonel R.G. Satterthwaite, O.B.E. from the National Playing Fields Association of Great Britain. Professor Gold gave the Opening Address "Designing Public Recreation Areas for User Safety" and Lieutenant Colonel Satterthwaite gave keynote lectures at the opening and closing sessions - "Why have Playgrounds" and "The Importance of Risk Taking" and "Challenges to Children".

There were several other remarkable papers, foremost amongst which was that by Mrs. Nan Lukey from the Department of Youth, Sport and Recreation, entitled "The Disabled Child in Playgrounds".

The Accident Data Session analysed the common playground accidents and considered fatal accidents to children at play. It was very obvious the data available for playground accidents was very limited.

In other sessions the themes were "Playground Supervision and Safety", "Playground Design and Safety", "The State of Playground Design in Australia", "Playgrounds of the Future".

From these topics most interest was shown in the areas of injuries, supervision of playgrounds, training of play-leaders, the role, design and supervision of adventure playgrounds, standards for playground equipment, playground design and siting. Interest was also shown in peripheral activities in playgrounds such as skate boarding; also the special facilities needed for the handicapped.

Workshops were held on both days, with open forum sessions and a final summing up session. All workshops discussed the problem of faulty equipment and the need to reach the community with information on such faulty equipment and the accidents that have occurred and may result,

National Seminar on Playground Design and Safety Continued

as well as the possibility of well designed new equipment which local government could be quite keen to install, once community interest was shown in the updating of old, or the establishment of new playgrounds.

The importance of 'safety standards', for playground equipment was made clear, and it is understood that 'standards' will shortly be available.

Recommendations from the Meeting were that:

1. A National Committee should be set up embracing the organisations which supported the National Seminar in order to continue this very important programme.
2. A National Resource Library be established for all relevant material and for the collection of statistics and its dissemination to all interested parties and especially local government and education departments.
3. A National Publicity Programme be instituted.
4. Local communities be urged to form committees and to invite local government interest.
5. Local Government Officers should be involved in planning phases of programmes mentioned, in order to encourage other municipalities to work with the local community for the success of playground improvement or establishment of programmes.
6. The 'child's view' on equipment and equipment design to be obtained and discussed at future meetings.

The legal implications of standards for playground equipment design was discussed, however it was thought that, in Australia today this was not going to be a major problem and should not be overemphasized. The duty of care of "a reasonable man" is still the liability condition in Australian law for such accident situations. In the case of injuries sustained in playgrounds, "reasonable care" will depend on the degree of risk existing in that particular playground.

In summing up, Lieutenant Colonel Satterthwaite made the point that:

1. Playground accidents have increased in the United Kingdom despite more modern equipment. In some areas this can clearly be seen as the result of the establishment of elderly citizens homes or villages located on the other side of the village or town. Children who formerly had a degree of supervision in playgrounds by their own extended family members or a neighbour, no longer had any supervision at all.
2. Children undoubtedly have the right to play in an as natural as possible environment and we should help to preserve natural environments to enable children to play with natural things.
3. The child however, must be made aware of his limitations, abilities and the basic laws of gravity.
4. Life itself demands courage, endurance, strength and we appear to underestimate the capacity of children to enjoy the stimulation of danger and excitement. If this causes us to worry, our problem is to find ways to provide places where children's love of freedom and their desire to seek challenges to test themselves is recognised, understood and provided for.

